

Project Approval Form (PAF)

Project Title:	Cycle Pack		
Primary Contact:	Christian Cole Laush		
By signing this form, I confirm that the project lead(s) has/have discussed this project with me, and that I (please check all that apply) v approve the stated project to be conducted on the University of Washington-Seattle campus (this approval can only be given by campus units or by individuals on behalf of campus units) (REQUIRED). agree to be a part of the project team. will provide support to the project by being a partnering organization, department or individual. v am the administrator for my campus unit and agree to for the financial and human resources Transactions associated with this project. v agree to take over the operational costs of this project following completion. Other notes (if applicable):			
	A^*I		
Name/Signature: Matt Jensen	NA/L-		Date: 4/26/2017
Title: Assistant Director			
Department/Organization: UWild Adventures			
Phone: 206-616-2083		Email: mcjensen@uw.edu	
Additional Notes:			

Please save this completed form as "Project Contact Name_Project Name" and email it to csfcoord@uw.edu. The email originating directly from the approving body will be considered a signature. Paper copies may be sent through campus mail to Attn: CSF Coordinator, Box 351248 or dropped off to the CSF Office at Gerberding Hall, Room B-40 and must include an original signature of the approving body.